

MARKET CONDUCT EXAMINATION

OF

Government Employees Insurance Company

GEICO Indemnity Company

GEICO Casualty Company

GEICO General Insurance Company

ONE GEICO PLAZA

WASHINGTON, D.C.20076-0001

JANUARY 1, 2000-DECEMBER 31, 2000



TABLE OF CONTENTS

Section	Page
Table of Contents	2
Salutation	3
Chief Examiner's Report Certification & Acknowledgements	4
Foreword	5
History, Operations and Management	7
Agent Licensing	8
Underwriting and Rating	10
New and Renewal Policies	10
Direct Telephone and Internet Sales	12
Non-renewed and Canceled Policies	15
Complaint Handling	16
Rate and Form Filings	17
Instructions	19
Appendix	20

January 31, 2001

Honorable Mike Kreidler
Insurance Commissioner
Office of the Insurance Commissioner
P.O. Box 40255
Olympia, Washington 98504

Dear Commissioner Kreidler:

Pursuant to your instructions and in compliance with the statutory requirements of RCW 48.03.010 and procedures promulgated by the National Association of Insurance Commissioners (NAIC) and the Office of the Insurance Commissioner (OIC), an examination of the market conduct affairs has been performed of:

Government Employees Insurance Company, NAIC # 22063
GEICO Indemnity Company, NAIC # 22055
GEICO Casualty Company, NAIC # 41491
GEICO General Insurance Company, NAIC #35882

One GEICO Plaza
Washington, D.C. 20076-0001

and this report of examination is respectfully submitted.

CHIEF EXAMINER'S REPORT CERTIFICATION and ACKNOWLEDGEMENTS

This examination was conducted in accordance with Office of the Insurance Commissioner and National Association of Insurance Commissioners' market conduct examination procedures. Sally Anne Carpenter, AIE, AIC and Shirley M. Merrill of the Washington State Office of the Insurance Commissioner performed this examination and participated in the preparation of this report.

The examiners wish to express appreciation for the courtesy and cooperation extended by the personnel of the GEICO companies during the course of this market conduct examination.

I certify that the following is the report of the examination, that I have reviewed this report in conjunction with pertinent examination work papers, that this report meets the provisions for such reports prescribed by the Office of the Insurance Commissioner, and that this report is true and correct to the best of my knowledge and belief.

Leslie A. Krier, AIE, FLMI
Chief Market Conduct Examiner
Office of the Insurance Commissioner

FOREWORD

This market conduct examination report is by exception and additional practices, procedures, and files subject to review during the examination were omitted from the report if no improprieties were indicated. Throughout the report, where cited, RCW refers to the Revised Code of Washington, and WAC refers to Washington Administrative Code.

Scope

This was a target examination reviewing personal lines underwriting and direct sales activities, including both telephone and Internet sales.

Time Frame

The examination covered the company's operations from January 1, 2000 through December 31, 2000. This was the third examination of the GEICO group of companies and was performed on-site at the companies' regional office in Poway, California.

Matters Examined

The examination included a review of the following areas:

Agent licensing	Complaint Handling
Underwriting and Rating	Rate & Form Filings
Cancellations and Non-Renewals	

Sampling Standards

Methodology

In general, the sample for each test utilized in this examination falls within the following guidelines:

92 %	Confidence Level
+/- 5 %	Mathematical Tolerance.

These are the guidelines prescribed by the National Association of Insurance Commissioners in the Market Conduct Examiners Handbook.

Regulatory Standards

Samples are tested for compliance with standards established by the Office of the Insurance Commissioner (OIC). The tests applied to sampled data will result in an error ratio, which determines whether or not a standard is met. If the error ratio found in the sample is, generally, less than 5%, the standard will be considered as "met." The standard in the area of agent licensing and appointment will not be met if any violation is identified. The standard in the area of filed rates and forms will not be met if any violation is identified. This will also apply when all records are examined, in lieu of a sample.

For those standards, which look for the existence of written procedures, or a process to be in place, the standard will be met based on the examiner's analysis of those procedures or processes. The analysis will include a determination of whether or not the company follows established procedures.

Summary of Previous Examinations

This was the third examination of GEICO and affiliates conducted by the Washington OIC.

Five instructions were issued to the companies in November 1995, as a result of violations found in the second market conduct examination. Three instructions related to underwriting activities:

- The companies were instructed to amend their procedures to allow the required time frame for notice of cancellations, and non-renewals.
- The companies were instructed to comply with the law regarding the language contained in the cancellation and non-renewal notices to ensure that the insured could understand the company's action without additional research.
- The companies were instructed to conduct their business in their own legal name as required.

The other two instructions addressed advertising and the contracts between the companies and their agents. Compliance with those instructions was not reviewed, as this was a target examination on underwriting and direct sales.

- The companies were instructed to identify the companies' home address on all advertising.
- The companies were instructed to issue an addendum to their agency contract. The addendum would require the company to give 120 days written notice prior to termination of the contract.

Evidence of continued non-compliance to any instruction is addressed in the appropriate sections of this report. Any corrections the companies have made were also noted.

HISTORY, OPERATIONS AND MANAGEMENT

The GEICO group of companies became indirect wholly owned subsidiaries of Berkshire Hathaway, Inc. (Berkshire), an insurance holding company January 2, 1996. Berkshire controls thirty four (34) property/casualty companies and four (4) life/health companies. Warren E. Buffet and family own approximately 38% of Berkshire.

The GEICO Group has four companies licensed to conduct business in Washington. They are:

- Government Employees Insurance Company
- GEICO General Insurance Company
- GEICO Indemnity Company
- GEICO Casualty Company

The companies' primary focus is writing personal lines private passenger automobile insurance. They are leading writers of active and retired government employees and military personnel. The companies also sell homeowners insurance through an arrangement with the Travelers Group.

Government Employees Insurance Company was formed was incorporated and reincorporated in the District of Columbia in 1937 and 1970, respectively. On January 3, 1986, the company was reincorporated and re-domesticated in the State of Maryland. This company writes preferred auto insurance for government and military employees.

The predecessor company to GEICO General Insurance Company was incorporated in Texas in 1934. Its present name was adopted in September, 1982. On June 22, 1989, the Company was reincorporated and re-domesticated in the State of Maryland. GEICO General Insurance Company writes preferred automobile insurance for people other than government or military personnel.

GEICO Indemnity Company was incorporated on March 22, 1961 in the District of Columbia under the name of Criterion Insurance Company. In 1986, the company was reincorporated and re-domesticated in the State of Maryland and its present name was adopted. GEICO Indemnity Company writes standard automobile insurance for the general public.

GEICO Casualty Company was incorporated August 31, 1982 under the laws of Maryland under the name of Guardian Casualty Company. The current name was adopted January 6, 1994. GEICO Casualty Company writes non-standard auto insurance risks that do not qualify for the standard or preferred GEICO companies.

Olza M. Nicely is Chairman of the Board, President and Chief Executive Officer of all four GEICO companies that were the subject of this examination. Board members and officers are available in the examiner's work papers.

AGENT LICENSING

The companies provided a list of 575 sales counselors who had sold Washington policies during the exam period. The examiners requested verification of the licensing status of all sales counselors who sold policies during the exam period in Washington. The records were reviewed at the companies' office. The examiners compared the agent's name with the Office of the Insurance Commissioner's (OIC) records to ensure that agents soliciting business for the companies were licensed and appointed pursuant to the requirements of RCW 48.17.060 and RCW 48.17.160.

The examiners identified 59 agents that were not licensed or appointed, at the time they solicited business for the companies. Based on these findings, the examiners requested additional records from the companies. The companies were instructed to provide a list of associated policies sold by all agents that were identified as not licensed and appointed by the companies at the time of sale. 1199 policies were sold by 59 sales counselors who were not licensed and appointed by the companies to conduct business in Washington at the time of the sale.

When asked what steps the companies took to ensure that a licensed, appointed agent participated in the sales process, the companies pointed out that their computer sales system is designed so that a licensed agent must "sign off or approve" the sale before the policy is issued. From information given to the examiners, this appears to be only a cursory review of the computer sales screens. Because this review takes place after the point of sale, the licensed, appointed agent does not participate in the solicitation of the policy. This practice does not meet the requirements of RCW 48.17.060(1) and (2), and RCW 48.17.160. The examiners' concerns about the quality and accuracy of the information given by sales counselors during sales transactions are covered in depth in the report section Direct Telephone and Internet Sales, pages 13-16.

"RCW 48.17.060 License required-Exceptions-Penalty. (1) No person shall in this state act as or hold himself out to be an agent, broker, solicitor, or adjuster unless then licensed therefor by this state.

(2) No agent, solicitor, or broker shall solicit or take applications for, procure, or place for others any kind of insurance for which he is not then licensed."

"RCW 48.17.160 Appointment of agents-Revocation-Expiration-Renewal. (1) Each insurer on appointing an agent in this state shall file written notice thereof with the commissioner on forms as prescribed and furnished by the commissioner, and shall pay the filing fee therefor as provided in RCW 48.14.010..."

Our findings are as follows:

- 1199 personal lines policies were written by agents that were not licensed in Washington at the time of the sale, as required by RCW 48.17.060(1), and not appointed by the companies as required by RCW 48.17.160(1). The list of 1199 policy numbers is contained in the examination work papers.

Total Population	Sample Size	# Violations	% in Violation
------------------	-------------	--------------	----------------

575	575	59	10.26%
-----	-----	----	--------

Standard: All agents will be licensed by the state of Washington prior to soliciting business for the Companies. (RCW 48.17.060 (1) and (2) (0% tolerance)

Result: The Companies did not meet this standard.

Standard: All agents must be appointed with the Companies prior to soliciting business for the Companies. (RCW 48.17.160)

Result: The Companies did not meet this standard. (0% tolerance)

Subsequent Event: On May 17, 2001, the Company implemented SalesTalk system. This system requires that the sales counselor enter their Washington license number along with their personal identification number before the sales counselor can quote rates or bind coverage.

Subsequent Event: On August 8, 2001 the Company implemented a system that reconciles appointments submitted to the state with appointments confirmed by the state. If a confirmation has not been received within 45 days, a report will be generated for follow up by Regional staff.

UNDERWRITING AND RATING

The examiners selected a random sample of 200 new and renewed personal automobile policies from a population of 111,962. Files were reviewed to determine if:

- the companies follow their filed rating plans
- the companies follow their underwriting rules consistently
- the companies were in compliance with Washington laws.

The examiners also manually rated policies to determine if there were any programmed errors in the companies' computer system and if the companies were using their filed and approved rates. Included in the sample were policies sold via direct calls to the companies, through the companies appointed independent agents, or via the Internet.

Policies with more than one violation will be listed in each violation category in the report.

Our findings are as follows:

"RCW 48.05.190 Name of the insurer. (1) Every insurer shall conduct its business in its own legal name."

One policy file contained a form letter (Form number U413-DP) that did not include the correct name of the company. This letter is sent to insureds when their policy lapses for non-payment of premium. The letter confirms that they no longer have coverage and offers an opportunity to reissue their policy. No specific company name is included in the letter.

This violation was also found in the prior examination.

Sample Size	# Violations	% in Violation
200	1	0.05 %

Standard: The Company must conduct business in its own name.

Result: The Companies met this standard.

Subsequent Event: The companies corrected this while the examiners were on site. The letter was corrected to automatically identify the correct name of the insuring company based on the insuring company of the lapsed policy.

RCW 48.22.030 Underinsured, hit-and-run, phantom vehicle coverage to be provided-Exceptions-Conditions-Deductibles. (2) No new policy or renewal of an existing policy insuring against loss resulting from liability imposed by law for bodily injury, death, or property damage, suffered by any person arising out of the ownership, maintenance, or use of a motor vehicle shall be issued with respect to any motor vehicle registered or principally garaged in this state unless coverage is provided therein or supplemental thereto for the protection of persons insured thereunder who are legally entitled to recover damages from owners or operators of underinsured motor vehicles, hit-and-run motor vehicles, and phantom vehicles...

(3) Except as to property damage, coverage required under subsection (2) of this section shall be in the same amount as the insured's third party liability coverage unless the insured rejects all or part of the coverage as provided in subsection (4) of this section...

(4) The named insured or spouse may reject, in writing, underinsured coverage for bodily injury or death, or property damage..."

One policy (#58195430) did not contain a signed underinsured motorist coverage rejection notice and the coverage was not included in the policy.

Total Population	Sample Size	# Violations	% in Violation
111,962	200	1	0.05 %

Standard: Files must contain evidence of a signed rejection for underinsured motorist coverage. (RCW 48.22.030)

Result: The Companies met this standard.

RCW 48.22.085 Automobile liability insurance policy-Optional coverage for personal injury protection-Rejection by insured. (1) No new automobile liability insurance policy or renewal of such an existing policy may be issued unless personal injury protection coverage benefits at limits established in this chapter for medical and hospital expenses, funeral expenses, income continuation, and loss of services sustained by an insured because of bodily injury caused by an automobile accident are offered as an optional coverage.

(2) A named insured may reject, in writing, personal injury protection coverage and the requirements of subsection (1) of this section shall not apply..."

One policy (TN1759) did not contain a signed personal injury protection coverage rejection and the coverage was not included in the policy.

Total Population	Sample Size	# Violations	% in Violation
111,962	200	1	.05%

Standard: Files must contain evidence that the insured signed a rejection notice for personal injury protection. (RCW 48.22.085)

Result: The Companies met this standard.

DIRECT TELEPHONE AND INTERNET SALES

The GEICO companies are primarily direct writers of automobile insurance. With the exception of a small number of policies written through captive agents, all of their business is written either through direct telephone sales, or Internet sales.

Telephone Sales:

The companies have a formal training program for new sales personnel. When they complete the agent licensing and sales training they become sales counselors. Most of the new hires have no prior insurance or sales training.

The first two weeks of training consists of an agent licensing class and testing for a California agent's license. After obtaining the California license the companies assist the sales counselors in obtaining licenses in other states, and file the appropriate appointment paperwork and fees.

The next 6 weeks is focused on sales training and technique. This includes learning to work through a computer program called "SalesTalk" which contains the screens that are completed when someone calls in for a quote. SalesTalk has some supporting screens that can be accessed that identify state requirements for liability, personal injury protection benefits (PIP) and uninsured/underinsured motorist (UIM) limits.

Following the completion of this training the sales counselor's are divided into small groups with a mentor, and start actual sales contact with callers. After completing this portion of the training the sales counselors are assigned to sales teams.

The companies have a monitoring system in place to audit a sample of sales counselors' calls on a monthly basis. The purpose of this monitoring is to determine what additional training is necessary, ensure that sales counselors are performing in an ethical manner and that the sales counselors are becoming proficient in selling the product. Employees who were previously sales supervisors complete this monitoring. There is no supervisory relationship between the auditor and the sales counselor. Comments from the auditors are sent to the supervisor to review and discuss with the sales counselor.

If a sales counselor receives a call from a state where the sales counselor is not licensed, the Sales Talk screens are designed to prevent the sale from being completed and processed without signoff from a sales counselor licensed in the caller's state. However this does not prevent the original sales counselor from advising the caller and leading up to the sale, it just has to be completed by a licensed counselor. Typically, the state specific licensed sales counselor does only a cursory review of the information entered into the computer and does not talk to the potential customer. At any time in the sales process, the counselor in training has the ability to transfer the call to someone who is licensed in the caller's state, but this rarely happens.

The companies address the requirements for obtaining signed rejections for UIM or PIP in the following manner for both telephone and Internet sales. The coverages are to be included in the policies until the signed rejections are received. A form is included when the policy or quote is

sent to the caller. That form allows the insured options to select or reject coverage, or change coverage limits. The insured is instructed to sign the form and return it to the issuing company to affect any changes. Unless the applicant has specifically requested higher limits, the company issues the policy with the PIP limits required by statute, and limits for the UIM that are the same as the 3rd party liability limits, also a requirement. If the form is returned within 30 days rejecting coverage the company will process the request without charge for coverage that was included in the policy. (See additional comments further on in this section of the report.)

In a normal week, the company has about 3,000 contacts with potential insureds through phone calls and internet queries. The examiners asked the company to provide them with a random sample of tapes from calls during the month of March 2000. The examiners listened to 15 recorded sales calls to determine if direct telephone solicitations were conducted in compliance with Washington law. The examiners observed the following:

- Questions by the caller were not always clearly answered. For example, the caller specifically asked about coverage for liability, personal injury protection (PIP) and underinsured motorist (UIM) coverage. The sales counselor provided a quote and stated it was only liability insurance coverage. The company stated that "liability only" meant no physical damage coverage but this was not explained to the caller.
- Responses to questions by the caller were not direct answers to the question, and sometimes misleading. In one call, the sales counselor told the caller that he should purchase rental reimbursement coverage so that if the insured was on a trip and something happened to his vehicle he could use the coverage to rent a car. The counselor did not mention that this coverage would only apply if the insured's vehicle was under repair for a covered collision or comprehensive loss.
- Quotes were not separated out by line of coverage.
- Information was not always given to the caller in a format that was easy to understand.
- Quotes were given in a format that did not reflect the payment plans that were available. The sales counselor failed to explain that a six-month payment plan was not an option for new insureds. The sales counselor did not discuss any service charges for the installment plans. The payment plan options were not discussed. When asked about this, the examiners were told that the counselors are trained to do this so an insured can do an "apples to apples" comparison to their current monthly payment. Then the counselor is supposed to immediately explain the difference of the companies' pay plans.
- Comments by sales counselors regarding the reasons for other companies underwriting decisions were made. These comments were sometimes disparaging or not documented as accurate.
- Callers were given incorrect quotes because sales counselors incorrectly identified the grouping or category based on the callers' occupation and highest level of schooling attained. This grouping affected the placement in a given company and the rates that were quoted. None of these quotes resulted in a sale.
- One caller asking for a quote was told by the sales counselor that suggested rates fluctuate at the company's discretion and that the company may charge any rate at any time. The counselor also made assumptions about the existing carrier and voiced those assumptions to the caller. Both of these actions are misleading.
- In one case, the sales counselor told the caller "other insurance companies don't make their money on the premiums. Instead they make their money by investing in the stock market.

When the stock market is slow, as it is now, the other companies raise rates to make money", and indicated that GEICO didn't need to raise rates because they are financially sound. The counselor went on to explain the A.M. Best rating and backing from Berkshire Hathaway. The counselor did not explain their relationship with Berkshire Hathaway.

- At one point the counselor, in talking about claims and coverages, confused a hit and run accident with comprehensive coverage in discussing the deductibles.

Of the 15 calls, the examiners found that over half contained false or misleading statements made by the sales counselors. The examiners reviewed these issues with the each company's underwriting manager for future training purposes.

Subsequent Events: After discussions between the OIC examiners and company representatives, the companies took remedial steps to re-train associates. These steps included additional monitoring of sales calls, team underwriting meetings with sales counselors to discuss areas requiring training for sales counselors, revision of the training manual and additional training classes added to their curriculum.

Internet Sales:

The companies have designed a web site to sell policies on line. The screens are designed to allow the customer to obtain a policy quote, or purchase a policy. When the customer is working through the screens, the direct toll-free line to the sales office is displayed. At any time during the transaction, the customer may call the company for assistance. The software is designed to feed the information that has been entered by the customer into the Sales Talk screens. The sales counselor can then assist the caller by completing a quote, or selling the policy.

NON-RENEWED AND CANCELED POLICIES

The examiners selected a random sample of 150 policies from a population of 46,179 policies for review. The policies were either cancelled or non-renewed during the exam period. The files were reviewed to determine if the companies were in compliance with state laws governing timeframes and required explanations for cancellations and non-renewals. The company has corrected the problems identified in the two instructions from the prior examination.

No findings were noted.

Total Population	Sample Size	# Violations	% of Violations
46,179	150	0	0

Standard: Cancellation notices and Non-Renewal notices must contain the reason for cancellation.

Result: The Companies met this standard.

COMPLAINT HANDLING

The purpose of this section of the examination was to review the company complaint handling procedures and compliance to WAC 284-30-650. The complaints were also reviewed for possible adverse trends in claim handling or underwriting. The examiners reviewed 15 of the 52 complaints from the 1999-2000 Complaint log. The log contained complaints filed with the OIC and complaints filed directly with the company.

The companies have written procedures for complaint handling, and maintain a database for tracking complaints and maintaining a diary for response.

Complaint files were reviewed to determine if any adverse patterns were noted.

The examiners requested further explanation regarding one complaint. The complaint was filed because the company ordered a credit report after the caller had specifically asked that it not be run. The company acknowledged that credit scores are obtained during the time the sales counselor is taking information from the caller, as part of the evaluation of the risk. The company acknowledged that, in this specific case, the credit score was obtained because the sales counselor did not know how to stop or interrupt the process, which is built into the Sales Talk software.

The complaint outlined the following scenario:

- The caller asked the sales counselor if a credit report would be run. The counselor responded yes, a credit report would be run as part of the company's underwriting process. The caller then specifically asked that a credit report not be run and the call was terminated. A credit report score was obtained, as the counselor did not know how to stop the credit score from being run.

Subsequent event:

The company has indicated additional training was provided to the sales counselors as a result of this complaint.

All responses were timely. There were no adverse findings or trends noted.

Standard: **The Company responds to complaints from the Office of the Insurance Commissioner within the time standards established in WAC 284-30-650.**

Result: **The Companies met this standard.**

RATE AND FORM FILING

A sample of rate and form filings was taken from the new and renewed policies used in the underwriting sample. The purpose of this sample was to determine if the companies were complying with the laws regarding the filing and use of rates and forms. No problems were detected in the forms sampling.

Rate Filings

"RCW 48.19.040 Filings required-Contents. (1) Every insurer or rating organization shall, before using, file with the commissioner every classifications manual, manual of rules and rates, rating plan, rating schedule, minimum rate, class rate, and rating rule, and every modification of any of the foregoing which it proposes. The insurer need not so file any rate on individually rated risks as described in subdivision (1) of RCW 48.19.030; except that any such specific rate made by a rating organization shall be filed...

(6) Where a filing is required no insurer shall make or issue an insurance contract or policy except in accordance with its filing then in effect, except as is provided by RCW 48.19.090."

Examiners were unable to manually rate vehicles by following the filed rates and rating manual when the vehicle had customized equipment that increased the value. When the companies were questioned about this, they indicated that sales counselors were instructed to manually override the system to change the symbol that sets the rates for comprehensive and collision coverages. The symbol is driven by the vehicle identification number (VIN), and value of the vehicle. By entering the total value of the vehicle including the additional value of the customized equipment, the sales counselors could force the system to display a higher symbol and charge a higher premium. There is nothing in the companies filed rating manual or filed rate plan to permit the collection of additional premium for customized vehicles by changing the auto symbol.

The examination was expanded to identify any policy that had increased comprehensive or collision rates as a result of the system override. The companies identified 19 policies that were quoted with increased comprehensive or collision rates in violation of the filing. Not all of the quoted policies were issued, and not all of the issued policies resulted in an overcharge. The examiners required the companies to identify and return all overcharged premiums, with a letter of explanation to the policyholders. Six policyholders received a total of \$2,309.48 in return premium. See Appendix I for detail.

Sample Size	# Violations	% of Violations
200	19	9.5%

Standard: Rates must be filed and approved prior to use. (RCW 48.19.040)

Results: The Companies did not meet this standard.

Subsequent Event: The Company states that the omission of private passenger vehicles in the casualty rating manual under reasons to allow increased premium was inadvertent and was refiled on March 29, 2001. The filing was effective June 18, 2001.

INSTRUCTIONS

1. The companies are instructed to establish procedures that ensure compliance with RCW 48.17.060 and RCW 48.17. 160. All sales counselors are to be licensed as Washington agents, properly appointed, and the filing fee paid as required by RCW 48.14.010, to ensure that no sales activities are conducted with Washington consumers unless the sales counselor is a licensed and appointed Washington agent. (Page 8)
2. The companies are instructed to establish procedures to comply with RCW 48.19.040(1) & (6) regarding filings, rating plans and application of approved rates. (Page 18)

RECOMMENDATIONS

1. It is recommended that the companies establish procedures that ensure compliance with RCW 48.05.190(1) and that policy documents and correspondence correctly identify the legal name of the insuring company. (Page 10)
2. It is recommended that the companies establish procedures to ensure compliance with RCW 48.22.030 (2) & (4) and that the insured has signed underinsured motorist rejection forms or selection of lower limit forms as required. (Page 10)
3. It is recommended that the companies establish procedures to ensure compliance with RCW 48.22.085 (1) & (2) and that the insured has signed a rejection form or the coverage is included with minimum limits as required. (Page 11)
4. It is recommended that the companies establish and monitor the activities of sales associates communicating with potential insureds via direct telephone solicitation. The examiners found that the sales associates were giving out inaccurate and/or misleading information to callers, incorrect quotes, and other misinformation. A program to monitor and audit the sales activities of the sales counselors by the underwriting department is recommended.

APPENDIX I

Policies in Violation of RCW 48.19.040(1)(6) Rates and Rate Manuals Must Be Approved Prior to Use

Policy Number	Comments
BC-52-40-0	The companies assigned a different symbol to rate the comprehensive and collision coverage in order to charge for customized equipment. \$ 88.40 was returned to the insured.
AU-42-81-0	The companies assigned a different symbol to rate the comprehensive and collision coverage in order to charge for customized equipment. \$ 198.20 was returned to the insured.
CB-96-71-0	The companies assigned a different symbol to rate the comprehensive and collision coverage in order to charge for customized equipment. \$ 113.50 was returned to the insured.
SW-70-74-0	The companies assigned a different symbol to rate the comprehensive and collision coverage in order to charge for customized equipment. \$ 346.50 was returned to the insured.
TA-86-47-0	The companies assigned a different symbol to rate the comprehensive and collision coverage in order to charge for customized equipment. \$ 490.88 was returned to the insured.
JT-49-85-0	The companies assigned a different symbol to rate the comprehensive and collision coverage in order to charge for customized equipment. \$ 1,072. Was returned to the insured.
AJ-46-94	Although a different symbol was assigned, no additional premium was charged.
AU-42-83	Although a different symbol was assigned, no additional premium was charged.
Customer #003200	Policy was bound, however no comprehensive or collision coverage was included.
Customer #005000	Policy was bound, however no comprehensive or collision coverage was included.
Customer # 003700	Policy was bound, however no comprehensive or collision coverage was included.
Customer #170000	Policy was bound, however no comprehensive or collision coverage was included.
Customer # 011000	Policy was bound, however no comprehensive or collision coverage was included.
Customer # 000200	Quote not accepted.
Customer # 000800	Quote not accepted.
Customer #001000	Quote not accepted.
Customer #002000	Quote not accepted.
Customer #002000	Quote not accepted.
Customer #000007	Quote not accepted.